

**EXHIBIT F-2 - ADJOURNED SALARIED PENSION AND OPEB CLAIM**

CREDITOR'S NAME AND ADDRESS *	CLAIM NUMBER	ASSERTED CLAIM AMOUNT **	DATE FILED	DOCKETED DEBTOR
BURGER BARBARA P	6468	Secured: Priority: UNL Administrative: Unsecured: _____ Total: UNL	05/22/2006	DELPHI CORPORATION (05-44481)
<b>Total:</b>		<b>1</b>		<b>UNL</b>

\* The address of the creditor on this exhibit has been intentionally omitted for privacy reasons.

\*\* "UNL" denotes an unliquidated claim.